

PUBLIC VOUCHER FOR PURCHASES OF  
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. \_\_\_\_\_  
Bu. Vou. No. 2072  
Approved For Release 2000/04/11 : CIA-RDP84-00600R000600010103-1

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_

(Payee)

PAID BY

Encl #7  
SAPC 26419  
COPY 1 OF 2

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				1,142.43	
PAYMENT:		Use continuation sheet(s) if necessary					
Complete	<input type="checkbox"/>						
Partial	<input type="checkbox"/>						
Final	<input type="checkbox"/>						
Shipped from _____ to _____		Weight _____	Government B/L No. _____		Total	1,142.43	
I certify that the above bill is correct and just and that payment has not been received.			(Payee must NOT use this space)				
STATINTL (Sign original only)			Differences _____				
Date 4/4/58 *Payee _____							
Per _____ Title _____			Amount verified; correct for (Signature or initials) <i>ee</i>			1,142.43	
Contract No. A-101		Date _____	Req. No. _____	Date _____	Invoice Rec'd.		

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_  
(Authorized Certifying Officer)

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ (on Treasurer of the United States in favor of payee named above.)  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_ Payee \_\_\_\_\_  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company must be given as well as the name of the person who signs the voucher. Example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Title \_\_\_\_\_

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010103-1

Public Voucher for Purchase and  
Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 2072

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>A-101</u> Costs applicable to All Systems  Direct Costs Properly Chargeable to Contract <u>A-101</u> for the period 3/24 thru 3/30/58  STATINTL  Research & Development					
		Labor for Week Ending March 30, 1958 STATINTL					
		Overhead for Communications Division computed at interim rates as follows: Research & Development - [REDACTED]					
		Other Costs - Per schedule attached					
		Total Labor, Overhead and Other Costs					
		G & A expense computed at interim rate of [REDACTED]					
		Total Costs STATINTL				\$ 1,142.43	



3/31/58

FORM STL - 660

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010103-1

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010103-1

[illegible]